DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	001 External Outfall	**Discharge:**	**001-0** STP OUTFALL		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004 ; DMF LOAD LIMITS DISPLAYED.

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00300	**Oxygen, dissolved [DO]**	1 - Effluent Gross	1	--	Sample						=	7.55	=	7.3	=	7.25	19 - mg/L	0	02/DA - 2 Days Every Week	GR - Grab
					Permit Req.						>=	6.0 MO AV MN	>=	4.5 MN WK AV	>=	4.0 DAILY MN	19 - mg/L		02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	7.76			=	8.03	12 - SU	0	02/DA - 2 Days Every Week	GR - Grab
					Permit Req.						>=	6.0 MINIMUM			<=	9.0 MAXIMUM	12 - SU		02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample	=	1126.0	=	1587.0	26 - lb/d			=	5.0	=	7.0	19 - mg/L	0	02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	26063.0 MO AVG	<=	46913.0 WKLY AVG	26 - lb/d			<=	25.0 MO AVG	<=	45.0 WKLY AVG	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00600	**Nitrogen, total [as N]**	1 - Effluent Gross	0	--	Sample								=	9.26	=	9.26	19 - mg/L		01/30 - Monthly	CP - Composite
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - Composite
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	9	--	Sample	=	70.0	=	97.0	26 - lb/d			=	0.32	=	0.5	19 - mg/L	0	02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	1564.0 MO AVG	<=	3128.0 DAILY MX	26 - lb/d			<=	1.5 MO AVG	<=	3.0 DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00665	**Phosphorus, total [as P]**	1 - Effluent Gross	0	--	Sample								=	16.6	=	19.3	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00940	**Chloride [as Cl]**	1 - Effluent Gross	0	--	Sample										=	472.0	19 - mg/L		01/30 - Monthly	CP - Composite
					Permit Req.											Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - Composite
					Value NODI															
00945	**Sulfate, total [as SO4]**	1 - Effluent Gross	0	--	Sample										=	464.0	19 - mg/L		01/30 - Monthly	CP - Composite
					Permit Req.											Req Mon DAILY MX	19 - mg/L		01/30 - Monthly	CP - Composite
					Value NODI															
01067	**Nickel, total [as Ni]**	1 - Effluent Gross	0	--	Sample	=	3.3			26 - lb/d			=	0.015			19 - mg/L	0	02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	40.0 MO AVG			26 - lb/d			<=	0.0381 MO AVG			19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
					Sample	=	25.53	=	36.52	03 - MGD									99/99 - Continuous	
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									99/99 - Continuous	

50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Value NODI															
50060	**Chlorine, total residual**	1 - Effluent Gross	0	--	Sample										<	0.011	19 - mg/L	0	02/DA - 2 Days Every Week	GR - Grab
					Permit Req.										<=	0.05 DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
74055	**Coliform, fecal general**	1 - Effluent Gross	0	--	Sample										=	11.0	13 - #/100mL		02/DA - 2 Days Every Week	GR - Grab
					Permit Req.										<=	400.0 DAILY MX	13 - #/100mL		02/DA - 2 Days Every Week	GR - Grab
					Value NODI															
80082	**BOD, carbonaceous [5 day, 20 C]**	1 - Effluent Gross	0	--	Sample	=	951.0	=	1584.0	26 - lb/d			=	4.0	=	8.0	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.	<=	20850.0 MO AVG	<=	41700.0 WKLY AVG	26 - lb/d			<=	20.0 MO AVG	<=	40.0 WKLY AVG	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															

Submission Note

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Edit Check Errors

No errors.

Comments

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:00 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	002 External Outfall	**Discharge:**	**002-0** EMERGENCY HIGH LEVEL OVERFLOW BYPASS		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W0430350001

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample															
					Permit Req.											Opt Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI											C - No Discharge				
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample															
					Permit Req.											Opt Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI											C - No Discharge				
74055	**Coliform, fecal general**	1 - Effluent Gross	0	--	Sample															
					Permit Req.											Opt Mon DAILY MX	13 - #/100mL		DL/DS - Daily When Discharging	GR - Grab
					Value NODI											C - No Discharge				
74071	**Flow**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo									DL/DS - Daily When Discharging	
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:05 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	003 External Outfall	**Discharge:**	**003-0** TREATED CSO-OAKLAND AVENUE		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004 ; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample										=	91.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	6.91			=	6.91	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample										=	180.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	0	--	Sample										=	2.37	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00665	**Phosphorus, total [as P]**	1 - Effluent Gross	0	--	Sample								=	2.57	=	2.57	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
82220	**Flow, total**	1 - Effluent Gross	0	--	Sample			=	0.84	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Value NODI															

Submission Note

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Edit Check Errors

No errors.

Comments

One day of discharge.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:06 (Time Zone: -06:00)
Report Last Signed By	
User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	004 External Outfall	**Discharge:**	**004-0** TREATED CSO-LINCOLN PARK		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004 ; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample										=	17.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	6.97			=	6.97	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample										=	46.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	0	--	Sample										<	0.12	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00665	**Phosphorus, total [as P]**	1 - Effluent Gross	0	--	Sample								=	0.68	=	0.68	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
82220	**Flow, total**	1 - Effluent Gross	0	--	Sample			=	0.1	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

One day of discharge.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:07 (Time Zone: -06:00)
Report Last Signed By	
User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	007 External Outfall	**Discharge:**	**007-0** TREATED CSO-MCKINLEY AVENUE		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004 ; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample										=	44.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	7.17			=	7.35	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample										=	180.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	0	--	Sample										=	0.703	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00665	**Phosphorus, total [as P]**	1 - Effluent Gross	0	--	Sample								=	0.98	=	1.13	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
82220	**Flow, total**	1 - Effluent Gross	0	--	Sample			=	1.48	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Two days of discharge.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:09 (Time Zone: -06:00)
Report Last Signed By	
User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	008 External Outfall	**Discharge:**	**008-0** TREATED CSO-SEVENTH WARD		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004 ; RECEIVING WATER: SANGAMON RIVERNUMBER OF DAYS OF DISCHARGE:GF

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	1 - Effluent Gross	0	--	Sample										=	41.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00400	**pH**	1 - Effluent Gross	0	--	Sample						=	7.29			=	7.29	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.							Req Mon MINIMUM				Req Mon MAXIMUM	12 - SU		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00530	**Solids, total suspended**	1 - Effluent Gross	0	--	Sample										=	62.0	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00610	**Nitrogen, ammonia total [as N]**	1 - Effluent Gross	0	--	Sample										=	0.48	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.											Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
00665	**Phosphorus, total [as P]**	1 - Effluent Gross	0	--	Sample								=	0.49	=	0.49	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		DL/DS - Daily When Discharging	GR - Grab
					Value NODI															
82220	**Flow, total**	1 - Effluent Gross	0	--	Sample			=	4.69	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo									DL/DS - Daily When Discharging	CN - Continuous
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

One day of discharge.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:10 (Time Zone: -06:00)
Report Last Signed By	
User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	A03 External Outfall	**Discharge:**	**A03-0** CSO-OAKLAND AVENUE CSO TREATMENT BYPASS		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
74062	**Overflows**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:11 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	A04 External Outfall	**Discharge:**	**A04-0** CSO-LINCOLN PARK CSO TREATMENT BYPASS		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
74062	**Overflows**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:11 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	A06 External Outfall	**Discharge:**	**A06-0** CSO-FAIRVIEW PARK CSO		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
74062	**Overflows**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:12 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	A07 External Outfall	**Discharge:**	**A07-0** CSO-MCKINLEY AVE CSO TREATMENT BYPASS		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
74062	**Overflows**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:12 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	A08 External Outfall	**Discharge:**	**A08-0** CSO-SEVENTH WARD CSO TREATMENT BYPASS		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1370200010 ; RECEIVING WATER:BRIAR CREEK

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
74062	**Overflows**	1 - Effluent Gross	0	--	Sample															
					Permit Req.				Opt Mon MO TOTAL	4K - #/mo										
					Value NODI				C - No Discharge											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

No discharge during the month.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:12 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

EPA may make all the information submitted through this form (including all attachments) available to the public without further notice to you. Do not use this online form to submit personal information (e.g., non-business cell phone number or non-business email address), confidential business information (CBI), or if you intend to assert a CBI claim on any of the submitted information. Pursuant to 40 CFR 2.203(a), EPA is providing you with notice that all CBI claims must be asserted at the time of submission. EPA cannot accommodate a late CBI claim to cover previously submitted information because efforts to protect the information are not administratively practicable since it may already be disclosed to the public. Although we do not foresee a need for persons to assert a claim of CBI based on the types of information requested in this form, if persons wish to assert a CBI claim we direct submitters to contact the NPDES eReporting Help Desk for further guidance. Please note that EPA may contact you after you submit this report for more information.

This collection of information is approved by OMB under the Paperwork Reduction Act, 44 U.S.C. 3501 et seq. (OMB Control No. 2040-0004). Responses to this collection of information are mandatory in accordance with this permit and EPA NPDES regulations 40 CFR 122.41(l)(4)(i). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The public reporting and recordkeeping burden for this collection of information are estimated to average 2 hours per outfall. Send comments on the Agency's need for this information, the accuracy of the provided burden estimates and any suggested methods for minimizing respondent burden to the Regulatory Support Division Director, U.S. Environmental Protection Agency (2821T), 1200 Pennsylvania Ave., NW, Washington, D.C. 20460. Include the OMB control number in any correspondence. Do not send the completed form to this address.

Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	INF Influent Structure	**Discharge:**	**INF-G** INFLUENT FLOW FROM GROUNDWATER DEWATERING SYSTEM		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
50050	**Flow, in conduit or thru treatment plant**	1 - Effluent Gross	0	--	Sample															
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									99/99 - Continuous	
					Value NODI		Q - Not Quantifiable		Q - Not Quantifiable											

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Existing infrastructure does not allow for measurement of flow.

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:13 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)

DMR Copy of Record

Form Approved OMB No. 2040-0004 expires on 07/31/2026

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Permit

Permit #:	**IL0028321**	**Permittee:**	SANITARY DISTRICT OF DECATUR	**Facility:**	SANITARY DISTRICT OF DECATUR MAIN STP
Major:	Yes	**Permittee Address:**	501 DIPPER LANE DECATUR, IL 62522	**Facility Location:**	501 DIPPER LANE DECATUR, IL 62522
Permitted Feature:	INF Influent Structure	**Discharge:**	**INF-L** INFLUENT REPORTING		

Report Dates & Status

Monitoring Period:	**From 10/01/26 to 10/31/26**	**DMR Due Date:**	**11/25/26**	**Status:**	**NetDMR Validated**

Considerations for Form Completion

W1150150004

Principal Executive Officer

First Name:	Kent	**Title:**	Executive Director	**Telephone:**	217-462-9413
Last Name:	Newton				

No Data Indicator (NODI)

Form NODI: --

Parameter		Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
Code	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00310	**BOD, 5-day, 20 deg. C**	G - Raw Sewage Influent	0	--	Sample								=	118.0			19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.									Req Mon MO AVG			19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00530	**Solids, total suspended**	G - Raw Sewage Influent	0	--	Sample								=	158.0			19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.									Req Mon MO AVG			19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
00665	**Phosphorus, total [as P]**	G - Raw Sewage Influent	0	--	Sample								=	21.3	=	24.6	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Permit Req.									Req Mon MO AVG		Req Mon DAILY MX	19 - mg/L		02/DA - 2 Days Every Week	CP - Composite
					Value NODI															
50050	**Flow, in conduit or thru treatment plant**	G - Raw Sewage Influent	0	--	Sample	=	22.46	=	33.83	03 - MGD									99/99 - Continuous	RT - Recorder Total
					Permit Req.		Req Mon MO AVG		Req Mon DAILY MX	03 - MGD									99/99 - Continuous	RT - Recorder Total
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

No errors.

Comments

Attachments

No attachments.

Report Last Saved By

SANITARY DISTRICT OF DECATUR

User:	keithrsdd
Name:	Keith Richard
E-Mail:	keithr@sddcleanwater.org
Date/Time:	2026-11-11 15:14 (Time Zone: -06:00)

Report Last Signed By

User:	TIMSDD89
Name:	Tim Gorden
E-Mail:	timg@sddcleanwater.org
Date/Time:	2026-11-12 06:49 (Time Zone: -06:00)